

ISSUE SLIP STAPLE AREA (for additional cross references)

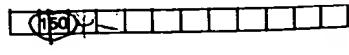
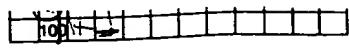
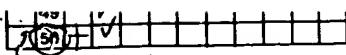
POSITION	INITIALS	ID NO.	DATE

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INDEX OF CLAIMS

Claim	Date
Final	
Original	
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Claim	Date
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If more than 150 claims or 10 actions
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ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID N .	DATE
FEE DETERMINATION	M-A-1		3/19/69
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	952 88518	88518	3/19/69 16/11/69

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 : Restricted O Objected

Claim	Date
Final	
Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✗
14	✓
15	✓
16	✓
17	✓
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19	✓
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42	✓
43	✓
44	✓
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47	✓
48	✓
49	✓
50	✓

Claim	Date
Final	
Original	
51	✓
52	✓
53	✓
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Claim	Date
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If more than 150 claims or 10 actions
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